



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
10903 New Hampshire Avenue  
Document Control Center – WO66-G609  
Silver Spring, MD 20993-0002

The Binding Site Group Ltd.  
c/o Jill Constantine, Ph.D.  
FDA Submissions Manager  
8 Calthorpe Road, Edgbaston  
Birmingham, West Midlands  
United Kingdom B15 1QT

July 3, 2013

Re: k123256

Trade/Device Name: Human alpha-1 Antitrypsin Kit for use on SPA<sub>PLUS</sub>

Regulation Number: 21 CFR 866.5130

Regulation Name: Alpha-1-antitrypsin immunological test system

Regulatory Class: II

Product Code: DEM

Dated: May 30, 2013

Received: May 30, 2013

Dear Dr. Constantine:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulations (21 CFR Parts 801 and 809), please contact the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638 2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

**Maria M. Chan -S**

Maria M. Chan  
Director  
Division of Immunology and Hematology Devices  
Office of In Vitro Diagnostics and Radiological  
Health  
Center for Devices and Radiological Health

Enclosure

## Indications for Use

510(k) Number (if known): k123256

Device Name: Human alpha-1 Antitrypsin Kit for use on SPA<sub>PLUS</sub>

### Indications For Use:

The Human  $\alpha$ 1-antitrypsin Kit for use on SPA<sub>PLUS</sub> is designed for the quantitative in vitro determination of  $\alpha$ 1-antitrypsin in human serum using the SPA<sub>PLUS</sub> turbidimetric analyzer. The measurement of  $\alpha$ 1- antitrypsin aids in the diagnosis of several conditions including adult cirrhosis of the liver. In addition,  $\alpha$ 1- antitrypsin deficiency has been associated with pulmonary emphysema. This test should be used in conjunction with other laboratory and clinical findings.

Prescription Use  X   
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 807 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF  
NEEDED)

Concurrence of CDRH; Office of In Vitro Diagnostics and Radiological Health (OIR)

**Maria M. Chan -S**

Division Sign-Off  
Office of In Vitro Diagnostics and Radiological Health

510(k):  k123256